

## **Preliminary Report of Accident**

This is a preliminary report of a reported mine fatality that occurred at Clover Fork No 1 on June 16, 2010. This report is subject to change as the accident is investigated and will be updated as NEW INFORMATION becomes available. A notice will be posted on MSHA's homepage when the report is updated.

## PR001 17-Jun-10

## **Preliminary Report of Accident**

## U.S. Department of Labor

Mine Safety and Health Administration

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1. Accident Type:	2.	Accident	Classificatio	fication				3. Date/Time of Accident 4.			4. Date/	4. Date/Time of Death			5. Fatal Case No	
Fatal Injury Fall of Face, F				illar or H	lighwa		06/16/2010 03:43 PM			06/1	06/16/2010 03:43 PM			38		
6. Mine Information :	 :													1		
a) Mining Company Name						) Mine Name					c) Parent of Mining Company					
Lone Mountain Processing Inc				C	lover F	ork No 1		ARG				RCH CO.	CH COAL, INC.			
7. Mine Location : a) City				b) County				c) State 8. Mine ID			D Number	Number: 9. Union:				
St. Charles				Harlan				KY	KY 15			5-18647	-18647 NO			
10. Primary Mineral Mined:								Inderground	c) Open Pit/Quarry			d) M	ill/Prep Plant	e) (	e) Other	
Bituminous Coal	Undergrou	und Mini	ng	Employe	es:	116		114			0		0		2	
12. Contractor Name:										13. Un	iion		14. Contra	ctor ID Nun	iber:	
15. Contractor Addre	ess:	a) (	City				b) (	County			c) St	ate	d) Z	ip Code		
									D1. (O			D 3.6111.05	DI .			
16. Number of Contr	actor Emplo	oyees:	a) Tot	al 10	ь) (	Undergrour 10	nd	c) Oper	n Pit/Qu 0	-		d) Mill/Pr	0 0	e) Other 0		
17. Number of Person	ns in Mine a	t Time of	Accident:					18. Number o	of Perso	ns Unac	counted F	or:				
a) Mine Employees:	3	7	b) Con	tractor E	mployee	s: 0		a) Mine Ei	mployee	s:	0	b) C	ontractor Em	ployees:	0	
19) Location of Accid			: :						•••			0.1		20. Mir	ing Height:	
X 01-Underground				03-Open Pit 07-Advance				*				Oth	er (specify)	Feet	Inches	
02-Surface at U	nderground			dge Minin	ıg	X 08-Ret	reat N	1ining	99-0	Office Fa	cility			15	6	
21. Nonfatal Injuries			22. Fatal Inju	ıries:	1										_	
23. Victim Informati	on:	j	a) Nan immy R. 0		(			b) Age 42								
c) Regular Job Title:	:					at Time of	Accid	ent:					X	Aine Empl	oyee	
Section I	Foreman							Section Fo	oremar	1						
24. Experience :	Years Wee	ks Days		Ye	ars Wee	eks Days					ks Days			Years Wee	ks Days	
a) Total:	17 0	0	b) at the	mine:	0 28	6	c) at a	ectivity (23d)		1 0			Contractor			
25. Autopsy Perform	red:	If Yes, Lo	ocation								26. Mi	ne Telepho 606)	one No.: S) 837-0072			
27. Description of Ac																
On June 16, 2010 Rib Accident on t rated Heintzmanr 6:20 p.m. Distric	0, at appro he Retrea n iack strik	oximatel iting 001	y 3:43 p.m MMU. A victim in th	i., a 42 y section ne head.	ear old of rib m The v	d Section neasuring rictim was	Forei 12 fe trans	man with 17 eet wide x 15 sported to th	years 5 feet 6 ie surfa	of mini inche ace wh	ing expe s high x ere he w	rience, re 9 feet thi as prond	ck fell knoc	king over	a 100-10n	
The information pro	of the accid		s based on pr	eliminary	data Ol	NLY and do	oes no	t represent fina		nination	s regardir	ng the natu	re of the incid	lent or concl	usions	
28. Equipment Man	ufacturer:								29. N	nouel:						
30. District: C0700 Barbourville				32. Field Office:				, KY			<u></u>	33. Event Number: 4240956				
34. Accident Investigator:				_1		35. MSH.	A Per	son Notified:				D	ate	Tim	e	
John C. Boylen						MS	SHA	Call Center				06/16	/2010	03:52 F	) =	
36. Type of Report:				37. Name of Preparer and Date Prepar Dennis Cotto									Date 06/17/2010			
····	endment:															